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PTO/SB/01 (6-95)

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Patent and Trademark Office, U. S. DEPARTMENT OF COMMERCE

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0010/PTO Rev. 6/99		U. S. Department of Commerce Patent and Trademark Office		Attorney Docket Number	H 4213 PCT/US
<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b>				First Named Inventor	BOLTE, Gerd
				COMPLETE IF KNOWN	
				Application Number	10/030,266
				Filing Date	
				Group Art Unit	
<input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing				Examiner Name	
As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
<b>PRESSURE-SENSITIVE POLYURETHANE COMPOSITION WITH A LOW MONOMER CONTENT</b>					
(Title of the invention)					
The specification of which <input type="checkbox"/> is attached hereto OR <input checked="" type="checkbox"/> was filed on (MM/DD/YYYY) <u>6/23/2000</u> as United States Application Number or PCT International Application Number <u>PCT/EP00/05804</u> and was amended on (MM/DD/YYYY) <u>                    </u> (if applicable)					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.					
I hereby claim foreign priority benefits under Title 35, United States Code § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
199 30 657.5	Germany	7/2/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority sheet attached hereto					
I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below					
Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto <input type="checkbox"/>			

Burden Hour Statement: This form is estimated to take 4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

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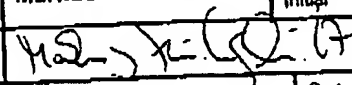
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DECLARATION		Page 2	
<p>I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365 of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.</p>			
U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP00/05804	6/23/2000	
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.			
<p>As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.</p>			
<input type="checkbox"/> Firm Name <span style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span>		<input type="checkbox"/> Customer Number <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span> or label <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>	
<input checked="" type="checkbox"/> List Attorney(s) and/or agent(s) name and registration number below			
Name	Registration Number	Name	Registration Number
Wayne C. Jaeschke Glenn E. J. Murphy Stephen D. Harper Kimberly R. Hild Steven C. Bauman	21,062 33,539 33,243 39,224 33,832		
<input type="checkbox"/> Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.			
Please direct all correspondence to <input checked="" type="checkbox"/> Customer Number <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span> or label <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>		OR <input checked="" type="checkbox"/> Fill in correspondence address below	
Name	Glenn E. J. Murphy		
Address	Henkel Corporation		
Address	2500 Renaissance Blvd, Suite 200		
City	Gulph Mills	State	PA
Country	USA	Telephone	610-278-4926
		Fax	610-278-6548
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Gerd	Middle Initial	Family Name
			BOLTE
Inventor's Signature			Date
			21.02.02
Residence: City	Monheim	State	Country
			Germany
Post Office Address	Wiener-Neustaedter Strasse 113		
Post Office Address			
City	40789 Monheim	State	Country
			Germany
		Zip	Applicant Authority
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto			

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DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Markus		Middle Initial		Family Name	KRUEDENSCHIEDT		Suffix e.g. Jr.			
Inventor's Signature						Date	21.02.02				
Residence: City	Langenfeld		State		Country	Germany		Citizenship	Germany		
Post Office Address	Lindberghstrasse 39										
Post Office Address											
City	40764 Langenfeld		State		Zip		Country	Germany		Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name			Middle Initial		Family Name			Suffix e.g. Jr.			
Inventor's Signature						Date					
Residence: City			State		Country			Citizenship			
Post Office Address											
Post Office Address											
City			State		Zip		Country			Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name			Middle Initial		Family Name			Suffix e.g. Jr.			
Inventor's Signature						Date					
Residence: City			State		Country			Citizenship			
Post Office Address											
Post Office Address											
City			State		Zip		Country			Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name			Middle Initial		Family Name			Suffix e.g. Jr.			
Inventor's Signature						Date					
Residence: City			State		Country			Citizenship			
Post Office Address											
Post Office Address											
City			State		Zip		Country			Applicant Authority	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto											